Illinois Department of Public Health

Procedure for use of categorical waivers in licensure plan reviews and surveys

Effective 03/09/12: IDPH Licensed Facilities

Under Title 77 Illinois Administrative Code Parts 250, 300, 350

Please note: categorical waivers are not to be submitted to the Department unless requested for the purposes of a plan review or survey. The documentation for the waivers should be maintained with the Provider's Policy and Procedures documents.

This is the procedure to be followed if a facility is requesting the use of a categorical waiver as described in the Center for Medicare and Medicaid Services (CMS) survey and certification memos.

The following is the list of categorical waivers that may qualify:

- S&C 12-21-LSC, dated March 9, 2012
  
  Equipment in the corridor  
  Seating in the corridor  
  Cooking facilities in the corridor  
  Fireplaces  
  Combustible decorations

- S&C Memo 13-25-LSC & ASC, dated April 19, 2013
  
  Relative humidity in anesthetizing locations

  
  Medical gas master alarms  
  Openings in exit enclosures  
  Emergency generator testing  
  Door locking arrangements  
  Suites  
  Sprinkler system testing  
  Clean waste & patient records recycling containers

The following will apply for each waiver requested:

Providers that want to take advantage of one or more of the categorical waivers must formally elect to use one or more of the waivers and must document their decision. The documentation must be on the Provider's letterhead and be signed by the authorized
representative. The documentation must address all requirements for each individual categorical waiver being requested as outlined in the appropriate S&C memo.


For licensure purposes, the Department has the ability to accept the categorical waivers in accordance with NFPA 101, 2000 Edition, Section 1.5.2. Alternative systems, methods, or devices approved as equivalent by the authority having jurisdiction shall be recognized as being in compliance with this Code. This is solely for the use of categorical waivers as described in the CMS S&C memos.

Due to the complex nature of some of the requirements, each waiver request will have to be evaluated separately in the interest of fire safety and to ensure the facility has followed all LSC requirements. The approval of categorical waivers is a project/situation specific approval issued on a case by case basis and not a blanket approval.

Example format:

On facility letterhead:

(Facility name)
(Facility address, city, state, zip)
(Facility license #/medicare #)

(State facility name) is electing to use the categorical waiver for (state condition the waiver is being used for) per S&C memo (state S&C memo # and date.) We confirmed we have reviewed the additional equivalency requirements as outlined in the S&C memo (state S&C memo # and date) and are in compliance with these requirements.

We further understand we are required to keep a copy of this documentation on site and it is to be available upon request at the time of an inspection. If requested for the purpose of a plan review, it will be provided with the response to the Department.

Printed/typed name and title of authorized representative

__________________________________________

Signature of authorized representative

Date